

# Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

CALIFORNIA  
2001/02  
FORM

COVER PAGE  
**460**

Page 1 of 97

For Official Use Only

Statement covers period

from 07/01/2017

through 12/31/2017

Date of election if applicable:  
(Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE

## 1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☒ Officeholder, Candidate Controlled Committee  
☒ State Candidate Election Committee  
☐ Recall

(Also Complete Part 5.)

- ☐ General Purpose Committee  
☐ Sponsored  
☐ Small Contributor Committee  
☐ Political Party/Central Committee

- ☐ Ballot Measure Committee  
☐ Primary Formed  
☐ Controlled  
☐ Sponsored

(Also Complete Part 6.)

- ☐ Primary Formed Candidate/  
Officeholder Committee  
(Also Complete Part 7.)

## 2. Type of Statement:

- ☐ Pre-election Statement  
☒ Semi-annual Statement  
☐ Termination Statement  
☐ Amendment (Explain below)

- ☐ Quarterly Statement  
☐ Special Odd-Year Report  
☐ Supplemental Preelection  
Statement - Attach Form 495

## 3. Committee Information

I.D. NUMBER  
1392359

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Skinner for Senate 2020

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Sacramento</u>	<u>CA</u>	<u>95815</u>	<u>(916)285-5733</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX/E-MAIL ADDRESS

(916) 333-1344 / Skinner2020@deaneandcompany.com

## Treasurer(s)

NAME OF TREASURER  
Nancy Skinner

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Sacramento</u>	<u>CA</u>	<u>95815</u>	<u>(916) 285-5733</u>

NAME OF ASSISTANT TREASURER, IF ANY  
Shawnda Deane

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Sacramento</u>	<u>CA</u>	<u>95815</u>	<u>(916) 285-5733</u>

OPTIONAL: FAX/E-MAIL ADDRESS

## 4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/30/2018 By Shawnda Deane  
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 01/30/2018 By Nancy Skinner  
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on \_\_\_\_\_ By \_\_\_\_\_  
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on \_\_\_\_\_ By \_\_\_\_\_  
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
State of California

Recipient Committee  
Campaign Statement  
Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA  
FORM **460**

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**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

Nancy Skinner

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Held: State Senator

Senate District

9

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Sacramento

CA

95815

**Related Committees Not Included in this Statement:** List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES

☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY

STATE

ZIP CODE

AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES

☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY

STATE

ZIP CODE

AREA CODE/PHONE

**6. Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT

☐ OPPOSE

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

**7. Primarily Formed Committee**

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

Attach continuation sheets if necessary

# Campaign Disclosure Statement Summary Page

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	<b>CALIFORNIA FORM 460</b> Page <u>3</u> of <u>97</u> I.D. NUMBER 1392359
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Skinner for Senate 2020

## Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions .....	Schedule A, Line 3	\$216,343.40	\$335,893.40
2. Loans Received .....	Schedule B, Line 7	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS .....	Add Lines 1 + 2	\$216,343.40	\$335,893.40
4. Nonmonetary Contributions .....	Schedule C, Line 3	\$1,951.56	\$2,066.56
5. TOTAL CONTRIBUTIONS RECEIVED .....	Add Lines 3 + 4	\$218,294.96	\$337,959.96

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

## Expenditures Made

6. Payments Made .....	Schedule E, Line 4	\$84,295.43	\$167,578.58
7. Loans Made .....	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS .....	Add Lines 6 + 7	\$84,295.43	\$167,578.58
9. Accrued Expenses (Unpaid Bills) .....	Schedule F, Line 3	\$2,422.35	\$2,841.39
10. Nonmonetary Adjustment .....	Schedule C, Line 3	\$1,951.56	\$2,066.56
11. TOTAL EXPENDITURES MADE .....	Add Lines 8 + 9 + 10	\$88,669.34	\$172,486.53

## Expenditure Limit Summary for State Candidates

### 22. Cumulative Expenditures Made\* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
<u>6/2/2020</u>	<u>\$75,022.42</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

## Current Cash Statement

12. Beginning Cash Balance .....	Previous Summary Page, Line 16	\$498,882.54	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts .....	Column A, Line 3 above	\$216,343.40	
14. Miscellaneous Increases to Cash .....	Schedule I, Line 4	\$568.45	
15. Cash Payments .....	Column A, Line 8 above	\$84,295.43	
16. <b>ENDING CASH BALANCE</b> .....	Add Lines 12 + 13 + 14, then subtract Line 15	\$631,498.96	
If this is a termination statement, Line 16 must be zero.			

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$0.00

## Cash Equivalents and Outstanding Debts

18. Cash Equivalents .....	See instructions on reverse	\$0.00
19. Outstanding Debts .....	Add Line 2 + Line 9 in Column B above	\$2,841.39

\*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

# Schedule A

## Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b> Page <u>4</u> of <u>97</u>
I.D. Number 1392359		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Skinner for Senate 2020

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/12/2017	2050 Partners, Inc. Orinda, CA 94563	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	2020P: \$100.00
8/25/2017	AB&I Foundry Oakland, CA 94621	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2020P: \$500.00
8/17/2017	Janet Abelson El Cerrito, CA 94530	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of El Cerrito Mayor	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/10/2017	Terri Adame Pleasant Hill, CA 94523	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	United Faculty of the Contra Costa Community College District Office Administrator	\$1,000.00	\$1,000.00	2020P: \$1,000.00

**SUBTOTAL**

### Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.) .....	\$216,084.00
2. Amount received this period - unitemized contributions of less than \$100 .....	\$259.40
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .....	<b>TOTAL</b> \$216,343.40

\*Contributor Codes  
 IND - Individual  
 COM - Recipient Committee  
       (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
10/27/2017	ADT, LLC Boca Raton, FL 33431	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/25/2017	Alameda Fire Fighters Association PAC Alameda, CA 94501 Committee ID: 890076	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2020P: \$500.00
8/21/2017	Alameda Labor Council AFL-CIO Solidarity PAC Small Contributor Committee Oakland, CA 94621 Committee ID: 1284523	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
8/26/2017	Ty Alper Berkeley, CA 94703	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	University of California Berkeley Professor	\$125.00	\$125.00	2020P: \$125.00
<b>SUBTOTAL</b>						

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(other than PTY or SCC)  
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# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/21/2017	Amalgamated Transit Union Local 1555 PAC Oakland, CA 94607 Committee ID: 981455	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2020P: \$2,500.00
9/13/2017	American Addiction Centers, Inc. Brentwood, TN 37027	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2020P: \$2,000.00
9/25/2017	American Federation of State, County & Municipal Employees Local 2428 PAC (AFSCME) Oakland, CA 94621 Committee ID: 890789	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	2020P: \$250.00
9/20/2017	American Federation of State, County and Municipal Employees Local 3299 PAC Sacramento, CA 95814 Committee ID: 1312649	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
<b>SUBTOTAL</b>						

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(other than PTY or SCC)  
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# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/24/2017	Anheuser Busch Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
8/16/2017	Robert Apodaca Oakland, CA 94607	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Robert Apodaca Business Developer	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	David Aroner Berkeley, CA 94708	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Retired	\$250.00	\$250.00	2020P: \$250.00
11/6/2017	AT&T Inc. and its Affiliates Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$2,300.00	2020P: \$2,300.00
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
		Page <u>8</u> of <u>97</u>
		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Skinner for Senate 2020

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/24/2017	Stevanne Auerbach Berkeley, CA 94703	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$375.00	\$375.00	2020P: \$375.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
9/25/2017	Bankers Insurance Company St. Petersburg, FL 33716	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,300.00	\$2,300.00	2020P: \$2,300.00
8/27/2017	Brandon Baranco Oakland, CA 94605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 9 of 97
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/13/2017	Zenobia Barlow Berkeley, CA 94704	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Center for Ecoliteracy Executive Director	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
10/23/2017	Bay Area Citizens PAC Emeryville, CA 94608 Committee ID: 1346828	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/23/2017	Richard Beahrs Berkeley, CA 94707	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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(other than PTY or SCC)  
OTH - Other  
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SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/4/2017	Berkeley Firefighters Association Local 1227 PAC Sacramento, CA 95814 Committee ID: 960450	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$8,800.00	2020P: \$4,400.00 2020G: \$4,400.00
8/4/2017	Berkeley Firefighters Association Local 1227 PAC Sacramento, CA 95814 Committee ID: 960450	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$8,800.00	2020P: \$4,400.00 2020G: \$4,400.00
8/25/2017	Jeff Bleich Piedmont, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Munger Tolles & Olson Attorney	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
9/28/2017	Bloom Energy Corporation Sunnyvale, CA 94089	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2020P: \$3,000.00
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
Page <u>11</u> of <u>97</u>		
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/26/2017	Bloom Energy Corporation Sunnyvale, CA 94089	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2020P: \$3,000.00
8/25/2017	Boxer & Gerson, LLP Oakland, CA 94612	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	2020P: \$250.00
8/4/2017	Rick Brown Larkspur, CA 94939	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TerraVerde Renewable Partners, LLC President	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/14/2017	Anthony Bruzzone Berkeley, CA 94709	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Arup Consultant	\$250.00	\$250.00	2020P: \$250.00
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
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(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
12/21/2017	Jon C. Buff Ontario, CA 91764	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Replant Holding, Inc. Executive Officer	\$2,000.00	\$2,000.00	2020P: \$2,000.00
8/25/2017	William Bush Lafayette, CA 94549	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Stem, Inc. Chief Financial Officer	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/3/2017	Karen Butterfield Oakland, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Stem, Inc. Executive	\$500.00	\$1,000.00	2020P: \$1,000.00
<b>SUBTOTAL</b>						

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       (other than PTY or SCC)  
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# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/16/2017	Karen Butterfield Oakland, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Stem, Inc. Executive	\$500.00	\$1,000.00	2020P: \$1,000.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/23/2017	California Association of Psychiatric Technicians, Inc. Political Action Fund Small Contributor Committee Sacramento, CA 95811 Committee ID: 882070	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,000.00	\$2,300.00	2020P: \$2,300.00
10/2/2017	California Cannabis Manufacturers Association Salinas, CA 93901	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,600.00	2020P: \$4,400.00 2020G: \$200.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/2/2017	California Cannabis Manufacturers Association Salinas, CA 93901	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$4,600.00	2020P: \$4,400.00 2020G: \$200.00
7/21/2017	California Conference Board Amalgamated Transit Union Small Contributor Committee Los Angeles, CA 90031 Committee ID: 761357	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/29/2017	California Energy Storage Alliance PAC Sacramento, CA 95814 Committee ID: 1382156	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$750.00	\$750.00	2020P: \$750.00
8/29/2017	California Federation of Teachers COPE PAC Small Contributor Committee Burbank, CA 91505 Committee ID: 741857	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$500.00	\$500.00	2020P: \$500.00
8/18/2017	California Machinists Non-Partisan Political League Sacramento, CA 95814 Committee ID: 761035	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$750.00	\$750.00	2020P: \$750.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 07/01/2017 through 12/31/2017		<b>CALIFORNIA FORM 460</b> Page 15 of 97
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NAME OF FILER

Skinner for Senate 2020

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/14/2017	California Metals Coalition PAC El Dorado Hills, CA 95762 Committee ID: 1264568	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2020P: \$2,500.00
8/25/2017	California Nurses Association PAC (CNA-PAC) Small Contributor Committee Sacramento, CA 95814 Committee ID: 780657	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,000.00	\$2,300.00	2020P: \$2,300.00
8/25/2017	California Park & Recreation Society Candidate PAC Sacramento, CA 95832 Committee ID: 1272380	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$600.00	\$600.00	2020P: \$600.00
8/22/2017	California Psychological Association PAC Sacramento, CA 95814 Committee ID: 822974	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
7/11/2017	California Radiological PAC Sacramento, CA 95814 Committee ID: 811596	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/22/2017	California Real Estate PAC - California Association of Realtors Small Contributor Committee Los Angeles, CA 90020 Committee ID: 890106	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
11/20/2017	California State Association of Electrical Workers Small Contributor Committee Orange, CA 92868 Committee ID: 743107	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$8,800.00	\$8,800.00	2020P: \$8,800.00
8/18/2017	Winkie Campbell-Notar Alameda, CA 94501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Albany Chamber of Commerce Nonprofit Manager	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/4/2017	Lisa Caronna Kensington, CA 94707	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$125.00	\$125.00	2020P: \$125.00
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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
		Page <u>17</u> of <u>97</u>
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	John Carrington Menlo Park, CA 94025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Stem, Inc. Chief Executive Officer	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/23/2017	James Chang Berkeley, CA 94704	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of Berkeley Commissioner	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/25/2017	Kathy M. Chao San Pablo, CA 94806	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of San Pablo Councilmember	\$250.00	\$250.00	2020P: \$250.00
8/23/2017	Charter Communications Saint Louis, MO 63131	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2020P: \$3,000.00
8/25/2017	Cheasty & Cheasty Attorneys at Law Berkeley, CA 94707	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2020P: \$500.00
8/25/2017	Steven Cohen Berkeley, CA 94705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
		Page <u>19</u> of <u>97</u>
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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8/8/2017	Consortium Management Group, LLC San Jose, CA 95126	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2020P: \$1,500.00
8/16/2017	Sachu Constantine Berkeley, CA 94709	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Center for Sustainable Energy Director of Policy	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/11/2017	Betsy Cotton Berkeley, CA 94705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Close the Gap California Nonprofit Management	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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8/15/2017	Kathleen Crandall Berkeley, CA 94705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Kathleen Crandall Realtor	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/17/2017	Francis De Rosa San Francisco, CA 94121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SunEdison Energy Developer	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
7/26/2017	Alexander Dean San Francisco, CA 94188	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hawk Hill Management, LLC Investor & Chairman	\$2,500.00	\$2,500.00	2020P: \$2,500.00
<b>SUBTOTAL</b>						

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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10/16/2017	Deloitte Services, LP Hermitage, TN 37076	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/25/2017	Susan Devico Oakland, CA 94612	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Susan Devico Public Relations	\$100.00	\$100.00	2020P: \$100.00
8/17/2017	Deborah Dinerman Piedmont, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
9/21/2017	District Council of Iron Workers Political Action League Small Contributor Committee Pinole, CA 94564 Committee ID: 831693	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
<b>SUBTOTAL</b>						

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
Page <u>22</u> of <u>97</u>		
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/4/2017	Kathy Doyle Oakland, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Kathy Doyle Chiropractor	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
7/5/2017	DRIVE Committee Washington, DC 20001	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$3,500.00	2020P: \$3,500.00
9/5/2017	DRIVE Committee Washington, DC 20001	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$3,500.00	2020P: \$3,500.00
8/25/2017	David Duong Oakland, CA 94606	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	California Waste Solutions President	\$1,000.00	\$1,000.00	2020P: \$1,000.00
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
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OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
		Page <u>23</u> of <u>97</u>
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
7/14/2017	Energy Efficiency, Inc. St. George, UT 84770	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2020P: \$500.00
10/16/2017	Ernst & Young LLP California PAC Los Angeles, CA 90017 Committee ID: 782408	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
7/26/2017	Facebook, Inc. Menlo Park, CA 94025	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,000.00	\$3,000.00	2020P: \$3,000.00
8/21/2017	Paul Fadelli El Cerrito, CA 94530	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bart Program Manager	\$125.00	\$125.00	2020P: \$125.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/17/2017	Sabrina Fendrick Berkeley, CA 94710	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Berkeley Patients Group Director of Government Affairs	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/17/2017	Mark Ferron Mill Valley, CA 94941	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	California Public Utilities Commission Commissioner	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b> Page <u>25</u> of <u>97</u>
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NAME OF FILER

Skinner for Senate 2020

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/25/2017	Amie J. Fishman Oakland, CA 94602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Non-Profit Housing Association of Northern California Executive Director	\$125.00	\$125.00	2020P: \$125.00
8/25/2017	Monica D. Fitzgerald Walnut Creek, CA 94598	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	St. Mary's College Professor	\$125.00	\$125.00	2020P: \$125.00
8/25/2017	Kieran Flaherty Oakland, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	University of California Government Relations	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	Foster Interstate Media, Inc. Oakland, CA 94607	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2020P: \$2,500.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through	12/31/2017	Page 26 of 97
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/25/2017	Jill L. Friedman Oakland, CA 94610	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	National Treasury Employees Union Attorney	\$125.00	\$125.00	2020P: \$125.00
8/25/2017	Karen Friedman Oakland, CA 94612	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Karen Friedman Attorney	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/3/2017	Mark Friedman El Cerrito, CA 94530	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Thomas J. Long Foundation Chief Executive Officer	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
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NAME OF FILER

Skinner for Senate 2020

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/18/2017	General Motors Company Federal PAC Washington, DC 20001	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/25/2017	Brendalynn R. Goodall Oakland, CA 94605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Retired	\$125.00	\$125.00	2020P: \$125.00
8/21/2017	Daniel Grace Oakland, CA 94621	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Grace & Company, Inc. Nurseryman	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/28/2017	Deborah Greenberg Anchorage, AK 99515	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Deborah Greenberg Attorney	\$125.00	\$125.00	2020P: \$125.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
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NAME OF FILER

Skinner for Senate 2020

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/9/2017	Donald Grether Berkeley, CA 94707	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/16/2017	Diane Griffiths Sacramento, CA 95831	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/28/2017	James M. Gullett Plymouth, CA 95669	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vino Noceto Winery Owner	\$100.00	\$100.00	2020P: \$100.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/29/2017	Zee Handoush Pinole, CA 94564	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	7 Stars Holistic Healing Center Business Owner	\$1,000.00	\$1,000.00	2020P: \$1,000.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/8/2017	Peter Hansel Sacramento, CA 95818	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CalPACE Chief Executive Officer	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
9/5/2017	Arthur Haubenstock San Francisco, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	8minutenergy Renewables Attorney	\$250.00	\$250.00	2020P: \$250.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
Page <u>30</u> of <u>97</u>		
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/8/2017	Miriam Hawley Oakland, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$200.00	\$200.00	2020P: \$200.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
11/1/2017	Mark Heising Atherton, CA 94027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Medley Partners Managing Partner	\$1,000.00	\$1,000.00	2020P: \$1,000.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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SCHEDULE A (CONT.)

Statement covers period from 07/01/2017 through 12/31/2017	<b>CALIFORNIA FORM 460</b>
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8/25/2017	Nancy M. Hinds Oakland, CA 94605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Retired	\$125.00	\$125.00	2020P: \$125.00
8/25/2017	Ann-Marie Hogan Berkeley, CA 94705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of Berkeley City Auditor	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	Russ Hudlemeyer Berkeley, CA 94701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Berkeley Place, Inc. Mental Health Provider	\$625.00	\$625.00	2020P: \$625.00
8/9/2017	I.B.E.W. Local Union 302 PAC Small Contributor Committee Martinez, CA 94533 Committee ID: 840975	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
<b>SUBTOTAL</b>						

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
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9/11/2017	Indus Holding Company Salinas, CA 93907	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,350.00	\$1,350.00	2020P: \$1,350.00
8/9/2017	International Association of Heat and Frost Insulations and Allied Workers Local 16, AFL-CIO PAC Benicia, CA 94510 Committee ID: 1250907	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2020P: \$500.00
8/14/2017	International Brotherhood of Boilermakers, Iron Ship Builders, Blacksmiths, Forgers, & Helpers Local 549 PAC Sacramento, CA 95814 Committee ID: 962367	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
8/17/2017	International Brotherhood of Electrical Workers Local 595 PAC Small Contributor Committee Dublin, CA 94568 Committee ID: 1273532	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2020P: \$2,500.00
9/25/2017	International Federation of Professional and Technical Engineers Local 21 (IFPTE), AFL-CIO PAC Fund San Francisco, CA 94103 Committee ID: 881248	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2020P: \$2,500.00
<b>SUBTOTAL</b>						

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/20/2017	International Union of Painters and Allied Trades Federal PAC (IUPAT) Hanover, MD 21076	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
9/11/2017	Jetty Marketing, LLC Denver, CO 80212	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,350.00	\$1,350.00	2020P: \$1,350.00
8/25/2017	Larsh Johnson La Jolla, CA 92037	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Stem Engineer	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	Douglas S. Jones San Leandro, CA 94577	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SEIU-UHW Healthcare Workers West Political Organizer	\$200.00	\$200.00	2020P: \$200.00
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
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(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 34 of 97

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Skinner for Senate 2020	I.D. Number 1392359
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/18/2017	Nicholas Josefowitz San Francisco, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bay Area Rapid Transit Director	\$4,400.00	\$4,400.00	2020P: \$4,400.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/17/2017	Dan Kalb Oakland, CA 94618	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of Oakland City Councilmember	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/17/2017	Edward Kangeter Oakland, CA 94607	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CASS, Inc. Chief Executive Officer	\$2,500.00	\$2,500.00	2020P: \$2,500.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through	12/31/2017	Page 35 of 97

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Skinner for Senate 2020

I.D. Number  
1392359

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	Patricia Kates Berkeley, CA 94708	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Homemaker	\$200.00	\$200.00	2020P: \$200.00
8/25/2017	Andy Katz Berkeley, CA 94704	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	East Bay Municipal Utility District Director	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/10/2017	Patrick Kennedy San Francisco, CA 94103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Panoramic Interests Housing Provider	\$1,000.00	\$1,000.00	2020P: \$1,000.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
Page <u>36</u> of <u>97</u>		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Skinner for Senate 2020

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	Christie Kiefer El Cerrito, CA 94530	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
9/11/2017	Gavin Elliot Kogan Monterey, CA 93940	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Gavin Kogan Attorney at Law Attorney	\$1,450.00	\$0.00	2020P: \$0.00
9/28/2017	Gavin Elliot Kogan Monterey, CA 93940 Memo Reference: INC329	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Gavin Kogan Attorney at Law Attorney	(\$1,450.00)	\$0.00	2020P: \$0.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 37 of 97
		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Skinner for Senate 2020

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/31/2017	Felix Kramer Berkeley, CA 94702	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$100.00	\$100.00	2020P: \$100.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/11/2017	John Kromer Berkeley, CA 94710	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	John Kromer Engineer	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/18/2017	Kim Kruckel Berkeley, CA 94703	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Child Care Law Center Executive Director	\$125.00	\$125.00	2020P: \$125.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
Page <u>38</u> of <u>97</u>		
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/8/2017	Jack Kurzweil Berkeley, CA 94703	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
7/31/2017	Large Scale Solar Association PAC Sacramento, CA 95814 Committee ID: 1332838	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/11/2017	Jason Laub Oakland, CA 94612	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Nautilus Group Real Estate Development	\$500.00	\$500.00	2020P: \$500.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through	12/31/2017	Page 39 of 97
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/8/2017	Cadir Lee Los Gatos, CA 95030	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OhmConnect Management	\$1,000.00	\$1,000.00	2020P: \$1,000.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/18/2017	Mike Lemyre Petaluma, CA 94954	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Ygrene Energy Fund Finance	\$2,500.00	\$2,500.00	2020P: \$2,500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 40 of 97

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Skinner for Senate 2020	I.D. Number 1392359
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/15/2017	Julia Levin Kensington, CA 94708	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bioenergy Association of California Executive Director	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	Jaimie Levine Berkeley, CA 94707	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Center for Transportation and the Environment Project Manager	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/15/2017	David Lewis Kensington, CA 94708	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Save The Bay Executive Director	\$250.00	\$250.00	2020P: \$250.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through	12/31/2017	Page 41 of 97
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	Michael Lindheim Oakland, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Stem, Inc. Energy Executive	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
9/6/2017	Local Societies of the California Optometric Association PAC Sacramento, CA 95814 Committee ID: 950393	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	2020P: \$250.00
8/15/2017	Bertram Lubin Berkeley, CA 94705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	University of California, San Francisco Benioff Children's Hospital Associate Dean of Children's Health	\$125.00	\$125.00	2020P: \$125.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through	12/31/2017	Page 42 of 97
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/1/2017	Jay Luboff Tucson, AZ 85718	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Navegant Consulting Consultant	\$100.00	\$100.00	2020P: \$100.00
8/25/2017	Jeannette Mahoney Richmond, CA 94803	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$100.00	\$100.00	2020P: \$100.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/3/2017	Linda Maio Berkeley, CA 94703	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of Berkeley Councilmember	\$250.00	\$250.00	2020P: \$250.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
		Page <u>43</u> of <u>97</u>
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	Juliana Mandell Oakland, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Green Charge Networks Director of Policy	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
7/24/2017	Anne Marks Oakland, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Youth Alive Nonprofit Director	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/25/2017	Tim Mason Berkeley, CA 94707	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Large-Scale Solar Association Policy Director	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/4/2017	Marsha McBride Oakland, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/18/2017	Conna McCarthy Piedmont, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Craigie McCarthy & Clow Attorney	\$250.00	\$250.00	2020P: \$250.00
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
		Page <u>45</u> of <u>97</u>
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/22/2017	James Meek Eagle, ID 83616	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Tim Lewis Communities Developer	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
9/7/2017	Alex Millar San Francisco, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	rePLANET, LLC Board of Directors	\$2,000.00	\$2,000.00	2020P: \$2,000.00
8/21/2017	Mt. Diablo Resource Recovery PAC Sacramento, CA 95815 Committee ID: 1393501	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
<b>SUBTOTAL</b>						

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       (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
		Page <u>46</u> of <u>97</u>
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/14/2017	David Mundstock Berkeley, CA 94704	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/21/2017	National Union of Healthcare Workers Candidate Committee Sacramento, CA 95815 Committee ID: 1318200	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/9/2017	Helen Nicholas Oakland, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Alain Pinel Realtors Real Estate Broker	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/25/2017	Northern California Carpenters Regional Council Small Contributor Committee Oakland, CA 94621 Committee ID: 972104	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
7/7/2017	Nossaman, LLP Los Angeles, CA 90017	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/11/2017	Oakland Police Officers Association PAC Oakland, CA 94618 Committee ID: 943526	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2020P: \$2,500.00
8/7/2017	Pat O'Brien San Rafael, CA 94903	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$100.00	\$100.00	2020P: \$100.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
		Page <u>48</u> of <u>97</u>
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/16/2017	Nancy O'Malley Alameda, CA 94501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Alameda County District Attorney	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/29/2017	Operating Engineers Local No. 3 Statewide PAC Small Contributor Committee Alameda, CA 94502 Committee ID: 981697	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2020P: \$2,500.00
8/21/2017	George Perezvelez Berkeley, CA 94708	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through	12/31/2017	Page 49 of 97

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Skinner for Senate 2020

I.D. Number  
1392359

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/25/2017	E. Gloria Polanski Berkeley, CA 94707	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	E. Gloria Polanski Realtor	\$150.00	\$150.00	2020P: \$150.00
8/28/2017	John Protopappas Oakland, CA 94607	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Madison Park Financial Corporation President/Chief Executive Officer	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
7/13/2017	Gabriel Quinto El Cerrito, CA 94530	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of El Cerrito Councilmember	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/16/2017	Robert Raich Oakland, CA 94619	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Robert Raich Attorney	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/22/2017	Silva Raker Richmond, CA 94801	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Exploratorium Manager	\$100.00	\$100.00	2020P: \$100.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/18/2017	Sanjay Ranchod Albany, CA 94706	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SolarCity Vice President of Policy and Regulatory Counsel	\$250.00	\$250.00	2020P: \$250.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
7/28/2017	Thomas Rankin Berkeley, CA 94707	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	State of California Board Member	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	Rena Rickles Attorney at Law Oakland, CA 94612	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$125.00	\$125.00	2020P: \$125.00
8/25/2017	Renew Financial Group, LLC Oakland, CA 94612	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2020P: \$2,500.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/10/2017	Republic Services, Inc. Phoenix, AZ 85054	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2020P: \$2,500.00
7/26/2017	Resource Innovations Half Moon Bay, CA 94019	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2020P: \$500.00
8/21/2017	Richmond Police Officers Association PAC Oakland, CA 94618 Committee ID: 951606	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/25/2017	Margot Rosenberg Berkeley, CA 94703	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Leonard Carder, LLP Attorney	\$125.00	\$125.00	2020P: \$125.00
8/25/2017	Rebecca Saltzman Oakland, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	California Leage of Conservation Voters Government Affairs Manager	\$125.00	\$125.00	2020P: \$125.00
<b>SUBTOTAL</b>						

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# Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/21/2017	Schnitzer Steel Industries Portland, OR 97210	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2020P: \$1,500.00
8/31/2017	Service Employees International Union Local 1021 Candidate PAC Small Contributor Committee Sacramento, CA 95814 Committee ID: 1296948	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$3,234.00	\$3,234.00	2020P: \$3,234.00
8/24/2017	Polly Shaw San Francisco, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Stem, Inc. Vice President	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
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9/27/2017	Sheet Metal Workers 104 District 2 Small Contributor Committee San Ramon, CA 94583 Committee ID: 882292	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$3,800.00	\$4,400.00	2020P: \$4,400.00
9/27/2017	Sheet Metal Workers' International Association Local No. 104 PAC San Ramon, CA 94583 Committee ID: 850381	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$600.00	\$5,000.00	2020P: \$4,400.00 2020G: \$600.00
8/25/2017	Aram Shumavon San Rafael, CA 94903	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Kevala Economist	\$125.00	\$125.00	2020P: \$125.00
8/28/2017	Joshua Simon Oakland, CA 94612	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	East Bay Asian Local Development Corporation Executive Director	\$200.00	\$200.00	2020P: \$200.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
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9/25/2017	Solar Energy Industries Association California PAC Washington, DC 20005 Committee ID: 1327739	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/25/2017	Sprinkler Fitters & Apprentices Local 483 Legislative PAC Hayward, CA 94545 Committee ID: 990058	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
12/11/2017	Standing Committee on Political Education of the California Labor Federation, AFL-CIO Small Contributor Committee Sacramento, CA 95814 Committee ID: 741504	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
8/3/2017	Stem, Inc. Millbrae, CA 94030	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2020P: \$2,000.00
8/3/2017	Ruth Strop Oakland, CA 94602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Farmers Insurance Group Insurance Agent	\$250.00	\$250.00	2020P: \$250.00
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
Page <u>56</u> of <u>97</u>		
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
9/13/2017	Sycuan Band of Kumeyaay Nation El Cajon, CA 92019	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2020P: \$2,000.00
8/19/2017	Peter Szutu Castro Valley, CA 94552	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/17/2017	Giovanna E. Tanzillo Piedmont, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Uptown Body and Fender Collision Repair	\$125.00	\$125.00	2020P: \$125.00
<b>SUBTOTAL</b>						

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(other than PTY or SCC)  
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PTY - Political Party  
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# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/17/2017	Tejon Ranch Lebec, CA 93243	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2020P: \$1,500.00
8/29/2017	Tesla, Inc. Palo Alto, CA 94304	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2020P: \$1,500.00
8/21/2017	The Alliance for Solar Choice San Francisco, CA 94105	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
9/29/2017	The Home Depot Atlanta, GA 30354	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
7/31/2017	Tim Farley for Contra Costa Community College District Martinez, CA 94553 Committee ID: 1369783	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$125.00	\$125.00	2020P: \$125.00
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
		Page <u>58</u> of <u>97</u>
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/18/2017	TMG Partners San Francisco, CA 94104	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
9/14/2017	U.A. Local 342 PAC Fund Concord, CA 94518 Committee ID: 890268	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2020P: \$1,000.00
8/2/2017	United Airlines San Francisco, CA 94128	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2020P: \$1,500.00
10/12/2017	United Auto Workers Region 5 Western States PAC (UAW) Pico Rivera, CA 90660 Committee ID: 743787	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
8/24/2017	United Food and Commercial Workers (UFCW) Western States Council Candidates PAC Small Contributor Committee Buena Park, CA 90620 Committee ID: 910874	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2020P: \$2,000.00
<b>SUBTOTAL</b>						

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IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
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# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
Page <u>59</u> of <u>97</u>		
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/4/2017	United Professional Fire Fighters of Contra Costa County I.A.F.F Local 1230 Candidate PAC Martinez, CA 94553 Committee ID: 744488	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$125.00	\$125.00	2020P: \$125.00
11/21/2017	Verizon Tulsa, OK 74117	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2020P: \$2,000.00
12/19/2017	Viejas Tribal Government Alpine, CA 91901	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2020P: \$4,400.00
9/5/2017	Viridis Fuels, LLC Oakland, CA 94611	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$300.00	\$300.00	2020P: \$300.00
8/24/2017	Visa U.S.A., Inc. San Francisco, CA 94105	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2020P: \$2,000.00
<b>SUBTOTAL</b>						

\*Contributor Codes  
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COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>
Page <u>60</u> of <u>97</u>		
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/17/2017	Melody Howe Weintraub Lafayette, CA 94549	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Winningresults Consultant	\$2,500.00	\$2,500.00	2020P: \$2,500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/25/2017	Stan Weisner Oakland, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	University of California, Berkeley Education Admin	\$125.00	\$125.00	2020P: \$125.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/18/2017	Lauren Westreich Piedmont, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Every Dog Has Its Day Care Dog Care	\$250.00	\$250.00	2020P: \$250.00
<b>SUBTOTAL</b>						

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(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
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NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/23/2017	Ellen Widess Berkeley, CA 94707	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Ellen Widess Consultant	\$250.00	\$250.00	2020P: \$250.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
7/13/2017	Gregory A. Wikler Lafayette, CA 94549	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Navigant Energy Economist	\$300.00	\$300.00	2020P: \$300.00
8/25/2017	Amy Worth Orinda, CA 94563	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a Not Employed	\$125.00	\$125.00	2020P: \$125.00
<b>SUBTOTAL</b>						

\*Contributor Codes  
 IND - Individual  
 COM - Recipient Committee  
       (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through	12/31/2017	Page 62 of 97
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/15/2017	Gordon Wozniak Berkeley, CA 94705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of Berkeley City Councilmember	\$1,000.00	\$1,000.00	2020P: \$1,000.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
8/17/2017	Robyn Young Alameda, CA 94502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Robyn G. Young, MD Neurologist	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>						

\*Contributor Codes  
 IND - Individual  
 COM - Recipient Committee  
       (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2017</u>		
		Page <u>63</u> of <u>97</u>
NAME OF FILER Skinner for Senate 2020		I.D. Number 1392359

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/11/2017	Jeremy Zachary Anaheim, CA 92807	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Culture Magazine Publisher	\$1,250.00	\$1,250.00	2020P: \$1,250.00
8/17/2017	Eric Zell Point Richmond, CA 94801	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Eric Zell Consultant	\$500.00	\$500.00	2020P: \$500.00
	***INTERMEDIARY*** ActBlue California Somerville, MA 02144	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>				\$216,084.00		

\*Contributor Codes  
IND - Individual  
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(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule B – Part 1 Loans Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 1

Statement covers period  
from 07/01/2017  
through 12/31/2017

CALIFORNIA  
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		 RATE %  		CALENDAR YEAR  PER ELECTION**  
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		 RATE %  		CALENDAR YEAR  PER ELECTION**  
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		 RATE %  		CALENDAR YEAR  PER ELECTION**  
					DATE DUE		DATE INCURRED	

SUBTOTALS

## Schedule B Summary

1. Loans received this period. \_\_\_\_\_  
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period \_\_\_\_\_  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) \_\_\_\_\_ **Net** \_\_\_\_\_  
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on  
Schedule E, Line 3)

\* Amounts forgiven or paid by  
another party also must be  
reported on Schedule A.

\*\* If required.

\*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC



# Schedule B - Part 2

## Loan Guarantors

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
<b>SUBTOTAL</b>					Enter on Summary Page, Line 17 only.	

# Schedule C

## Nonmonetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE C

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
8/23/2017	Family Winemakers of California PAC Sacramento, CA 95814  Committee ID: 1239883	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Fundraising Beverages	\$106.00	\$106.00	2020P: \$106.00
9/5/2017	California Professional Firefighters PAC Small Contributor Committee Sacramento, CA 95833  Committee ID: 744058	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		Printing	\$676.56	\$2,676.56	2020P: \$2,676.56
8/25/2017	International Association of Firefighters, Local 55 PAC Oakland, CA 94612  Committee ID: 892160	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Fundraising Event	\$1,169.00	\$1,169.00	2020P: \$1,169.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL** \$1,951.56

## Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more. (Include all Schedule C subtotals.).....	\$1,951.56
2. Amount received this period - unitemized nonmonetary contributions of less than \$100 .....	\$0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) .....	<b>TOTAL</b> \$1,951.56

\*Contributor Codes  
IND - Individual  
COM- Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule D

## Summary of Expenditures

### Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE D

Statement covers period

from 07/01/2017

through 12/31/2017

CALIFORNIA  
FORM **460**

Page 67 of 97

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/29/2017	East Bay Stonewall Democratic Club	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/16/2017	Alameda County Democratic Central Committee	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,500.00	\$2,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/13/2017	Payee Name: Wendy Carrillo for Assembly 2017 Candidate Name: Wendy Carrillo State Assembly Person District 51 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$3,500.00	\$6,000.00	2017S: \$2,500.00 2017G: \$3,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SUBTOTAL**

## Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) ..... \$17,900.00
- Unitemized contributions and independent expenditures made this period of under \$100 ..... \$0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL** \$17,900.00

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

**Schedule D**  
**(Continuation Sheet)**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures and Committees**

Type or print in ink.  
 Amounts may be rounded  
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 07/01/2017

through 12/31/2017

**CALIFORNIA**  
**FORM 460**

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NAME OF FILER  
 Skinner for Senate 2020

I.D. NUMBER  
 1392359

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/13/2017	Payee Name: Josh Newman for Senate 2020 Candidate Name: Josh Newman State Senator District 29 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Non-Monetary Contribution  <input type="checkbox"/> Independent Expenditure		\$4,400.00	\$4,400.00	2020P: \$4,400.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/13/2017	Payee Name: Nick Josefowitz for Supervisor 2018 Candidate Name: Nick Josefowitz County Supervisor District 2	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/14/2017	Californians for Better Communities, Opposing the Recall of Senator Josh Newman	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$5,000.00	\$5,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/14/2017	Fund Her PAC	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SUBTOTAL** \$17,900.00

# Schedule E Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period from 07/01/2017 through 12/31/2017		<b>CALIFORNIA FORM 460</b>  Page 69 of 97
I.D. NUMBER 1392359		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Verizon Wireless Dallas, TX 75266	OFC			\$87.24
Deane & Company Sacramento, CA 95815	PRO			\$1,365.80
Deane & Company Sacramento, CA 95815	PRO			\$1,000.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

## Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) .....	\$84,089.66
2. Unitemized payments made this period of under \$100. ....	\$205.77
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .....	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .....	<b>TOTAL</b> \$84,295.43

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 70 of 97
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Bertolina & Barnato, Inc. Sacramento, CA 95814	FND			\$2,500.00
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$14.82
Card Service Center Dallas, TX 75356			Credit Card Payment	\$264.53
Card Service Center Dallas, TX 75356			Credit Card Payment	\$419.04
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$173.80

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		<b>CALIFORNIA FORM 460</b>  Page <u>71</u> of <u>97</u>
I.D. NUMBER 1392359		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Verizon Wireless Dallas, TX 75266	OFC			\$91.01
Contra Costa Labor to Labor Oakland, CA 94602	CVC			\$3,000.00
Bertolina & Barnato, Inc. Sacramento, CA 95814	FND			\$2,500.00
Contra Costa Building and Construction Trades Council (CCBCTC) Oakland, CA 94602	CVC			\$350.00
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$24.70

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through 12/31/2017		Page 72 of 97
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Bertolina & Barnato, Inc. Sacramento, CA 95814	FND		Appetizers Only	\$457.94
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$64.21
Deane & Company Sacramento, CA 95815	PRO			\$1,115.99
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$206.42
Card Service Center Dallas, TX 75356			Credit Card Payment	\$131.95

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**



# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 73 of 97
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Chinese American Political Association Community Education Fund (CAPA) Oakland, CA 94612	CVC			\$250.00
Oakland Community Organizations (OCO) Oakland, CA 94605	CVC			\$250.00
East Bay Stonewall Democratic Club Berkeley, CA 94707	CTB			\$1,000.00
Committee ID: 840821 Verizon Wireless Dallas, TX 75266	OFC			\$135.72
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$627.13

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 74 of 97
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Deane & Company Sacramento, CA 95815	PRO			\$1,071.71
The Cypress Mandela Training Center, Inc. (CMTCC) Oakland, CA 94621	CVC			\$2,500.00
Bertolina & Barnato, Inc. Sacramento, CA 95814	FND			\$2,500.00
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$298.31
Alliance Graphics Berkeley, CA 94710	CMP			\$428.81

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 75 of 97
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Tasha Henneman Berkeley, CA 94703	OFC			\$393.46
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$9.88
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$67.15
Card Service Center Dallas, TX 75356			Credit Card Payment	\$1,327.71
Verizon Wireless Dallas, TX 75266	OFC			\$107.16

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 76 of 97
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Sierra Club San Francisco Bay Chapter Berkeley, CA 94702	CVC			\$500.00
Bertolina & Barnato, Inc. Sacramento, CA 95814	FND			\$2,500.00
Deane & Company Sacramento, CA 95815	PRO			\$1,392.62
Berkeley Community Fund Berkeley, CA 94704	CVC			\$1,250.00
Alameda County Democratic Central Committee San Leandro, CA 94577	CTB			\$2,500.00
Committee ID: 747153				

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from <u>07/01/2017</u>		
through <u>12/31/2017</u>		Page <u>77</u> of <u>97</u>
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Transform Oakland, CA 94612	CVC			\$500.00
Barbara Lee for Congress Oakland, CA 94621			Federal Contribution	\$500.00
Cynthia Brantly Pierce Berkeley, CA 94703	FND			\$22,898.00
Cynthia Brantly Pierce Berkeley, CA 94703	POS			\$98.00
Cynthia Brantly Pierce Berkeley, CA 94703	FND			\$312.77

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
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NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Cynthia Brantly Pierce Berkeley, CA 94703	FND		Appetizers Only	\$199.49
Card Service Center Dallas, TX 75356			Credit Card Payment	\$399.73
Alliance Campaign Strategies, LLC Pleasanton, CA 94566	PRT			\$150.00
Verizon Wireless Dallas, TX 75266	OFC			\$110.93
Bertolina & Barnato, Inc. Sacramento, CA 95814	FND			\$2,500.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through 12/31/2017		Page 79 of 97
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Deane & Company Sacramento, CA 95815	PRO			\$1,054.22
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$39.50
Community Energy Services Corporation Berkeley, CA 94710	CVC			\$300.00
Wendy Carrillo for Assembly 2017 Fullerton, CA 92835	CTB			\$3,500.00
Committee ID: 1396972 Josh Newman for Senate 2020 Brea, CA 92821	CTB			\$4,400.00
Committee ID: 1392939				

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 80 of 97
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Nick Josefowitz for Supervisor 2018 San Francisco, CA 94103	CTB			\$500.00
Committee ID: 1398618 Californians for Better Communities, Opposing the Recall of Senator Josh Newman Sacramento, CA 95815	CTB			\$5,000.00
Committee ID: 1396135 Fund Her PAC Sacramento, CA 95814	CTB			\$1,000.00
Committee ID: 1398107 BTC-Special Events Oakland, CA 94602	CVC			\$1,500.00
Card Service Center Dallas, TX 75356			Credit Card Payment	\$19.95

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**



# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through 12/31/2017		Page 81 of 97
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
UC Regents Berkeley, CA 94720	CVC			\$232.00
Verizon Wireless Dallas, TX 75266	OFC			\$110.93
Bertolina & Barnato, Inc. Sacramento, CA 95814	FND			\$2,500.00
Socially Responsible Network Oakland, CA 94612	CVC			\$500.00
Deane & Company Sacramento, CA 95815	PRO			\$1,062.90

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

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Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 07/01/2017		
through 12/31/2017		Page 82 of 97
NAME OF FILER Skinner for Senate 2020		I.D. NUMBER 1392359

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Card Service Center Dallas, TX 75356			Credit Card Payment	\$1,320.18
Kevin De Leon for Senate Sacramento, CA 95814			Federal Contribution	\$500.00
ActBlue Technical Services, Inc. Somerville, MA 02144	OFC			\$3.95

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL** \$84,089.66

# Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE F

Statement covers period  
from 07/01/2017  
through 12/31/2017

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Card Service Center Dallas, TX 75356	Credit Card Payment	\$419.04	\$0.00	\$419.04	\$0.00
Card Service Center Dallas, TX 75356	Credit Card Payment	\$0.00	\$1,327.71	\$0.00	\$1,327.71
Verizon Wireless Dallas, TX 75266	OFC	\$0.00	\$195.18	\$0.00	\$195.18

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

## SUBTOTALS

## Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** \$2,841.39
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** \$419.04
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** \$2,422.35  
May be a negative number.

Schedule F  
(Continuation Sheet)  
Accrued Expenses (Unpaid Bills)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 07/01/2017  
through 12/31/2017

NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)\*

LEG legal defense

LIT campaign literature and mailings
- MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads
- RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, email)

\*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Card Service Center Dallas, TX 75356	Credit Card Payment	\$0.00	\$1,293.55	\$0.00	\$1,293.55
Card Service Center Dallas, TX 75356	Credit Card Payment	\$0.00	\$24.95	\$0.00	\$24.95
SUBTOTALS		\$419.04	\$2,841.39	\$419.04	\$2,841.39

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period from 07/01/2017 through 12/31/2017	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
Card Service Center

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Aioli Bodega Espanola Sacramento, CA 95811	FND		Appetizers Only	\$658.87
Vallejo's Restaurant Sacramento, CA 95814	MTG		12/19/17, Campaign Meeting, 14, including Candidate	\$239.96
Bissap Baobab Oakland, CA 94612	MTG		8/25/17, Legislative Staff Meeting, 10, including Candidate	\$276.33
Casa de Chocolates Berkeley, CA 94704	OFC		12/14/18, Holiday Gift, Chocolate Assortment, Capitol Staff, 14	\$658.80

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$1833.96

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**FPPC Form 460 (June/01)**  
**FPPC Toll-Free Helpline: 866/ASK-FPPC**

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.  
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to whole dollars.

SCHEDULE G

Statement covers period  
from 07/01/2017  
through 12/31/2017

CALIFORNIA  
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
Card Service Center

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Constant Contact Waltham, MA 02451	OFC			\$5.00
Constant Contact Waltham, MA 02451	OFC			\$41.33
Constant Contact Waltham, MA 02451	OFC			\$45.00
Constant Contact Waltham, MA 02451	OFC			\$20.00

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$111.33

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FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
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through	12/31/2017	Page 87 of 97

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NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
Card Service Center

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Constant Contact Waltham, MA 02451	OFC			\$65.00
Constant Contact Waltham, MA 02451	OFC			\$45.00
Legal Services for Prisoners with Children/All of Us or None of Us San Francisco, CA 94117	CVC			\$150.00
Nielsen Arts Gallery and Custom Framing Berkeley, CA 94707	OFC			\$301.81

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$561.81

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**FPPC Form 460 (June/01)**  
**FPPC Toll-Free Helpline: 866/ASK-FPPC**

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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to whole dollars.

SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
Card Service Center

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Nielsen Arts Gallery and Custom Framing Berkeley, CA 94707	OFC			\$127.00
Nielsen Arts Gallery and Custom Framing Berkeley, CA 94707	OFC			\$507.59
Pompette Berkeley, CA	FND	7/14/17, Fundraising Event, 6, including Candidate		\$198.25
Pushkin's Bakery Sacramento, CA 95816	MTG	Appetizers Only		\$205.92

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$1038.76

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**FPPC Form 460 (June/01)**  
**FPPC Toll-Free Helpline: 866/ASK-FPPC**



# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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Amounts may be rounded  
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SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
Card Service Center

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Rotary Club of Oakland Oakland, CA 94612	CVC			\$363.00
Rotary Club of Oakland Oakland, CA 94612	CVC			\$183.00
Southwest Airlines Dallas, TX 75235	TRC			\$47.00
Southwest Airlines Dallas, TX 75235	TRC			\$84.78

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$677.78

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**FPPC Form 460 (June/01)**  
**FPPC Toll-Free Helpline: 866/ASK-FPPC**

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
Card Service Center

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Triple8 Network, Inc. El Segundo, CA 90245	OFC			\$19.95
Triple8 Network, Inc. El Segundo, CA 90245	OFC			\$19.95
Triple8 Network, Inc. El Segundo, CA 90245	OFC			\$19.95
Triple8 Network, Inc. El Segundo, CA 90245	OFC			\$19.95

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$79.80

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**FPPC Form 460 (June/01)**  
**FPPC Toll-Free Helpline: 866/ASK-FPPC**

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
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1392359

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
Card Service Center

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Triple8 Network, Inc. El Segundo, CA 90245	OFC			\$19.95
Triple8 Network, Inc. El Segundo, CA 90245	OFC			\$19.95
Asian Health Services Oakland, CA 94607	CVC			\$250.00

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$289.90

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**FPPC Form 460 (June/01)**  
**FPPC Toll-Free Helpline: 866/ASK-FPPC**

# Schedule H – Loans Made to Others\*

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE H

Statement covers period

from 07/01/2017

through 12/31/2017

**CALIFORNIA**  
**FORM 460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		<b>SUBTOTALS</b>						

(Enter (e) on  
Schedule I, Line 3)

## Schedule H Summary

1. Loans made this period .....  
(Total Column (b) plus unitemized loans less than \$100.)

2. Payments received on loans .....  
(Total Column (c) plus unitemized payments less than \$100.)

3. Net change this period. (Subtract Line 2 from Line 1.) ..... **NET**  
(Enter the net here and on the Summary Page, Column A, Line 7.)

\*\* If Required

(May be a negative number)

# Schedule I

## Miscellaneous Increases to Cash

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2017	
through	12/31/2017	Page 93 of 97

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Skinner for Senate 2020

I.D. NUMBER  
1392359

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
7/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$1.17
7/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$94.39
8/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$1.17
8/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$94.42
8/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$0.08

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL**

### Schedule I Summary

- Increases to cash of \$100 or more this period.....
- Unitemized increases to cash under \$100 this period. ....
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).).....
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....

**TOTAL** .....

# Schedule I

## Miscellaneous Increases to Cash

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period		<b>CALIFORNIA FORM 460</b>
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Skinner for Senate 2020

I.D. NUMBER  
1392359

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
9/30/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$1.13
9/30/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$91.39
9/30/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$0.18
10/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$94.46
10/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$0.21

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL**

### Schedule I Summary

- Increases to cash of \$100 or more this period.....
- Unitemized increases to cash under \$100 this period.....
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).).....
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....

**TOTAL** .....

# Schedule I Miscellaneous Increases to Cash

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Skinner for Senate 2020	I.D. NUMBER 1392359
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DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
10/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$1.17
11/30/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$91.44
11/30/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$0.21
11/30/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$1.13
12/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$1.17

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL**

## Schedule I Summary

- Increases to cash of \$100 or more this period.....
- Unitemized increases to cash under \$100 this period. ....
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).).....
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....

**TOTAL** .....

# Schedule I

## Miscellaneous Increases to Cash

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period		<b>CALIFORNIA FORM 460</b>
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DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
12/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$94.51
12/31/2017	First Foundation Bank Sacramento, CA 95815	Interest Earned	\$0.22

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL** \$568.45

### Schedule I Summary

1. Increases to cash of \$100 or more this period.....	\$568.45
2. Unitemized increases to cash under \$100 this period. ....	\$0.00
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).).....	\$0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....	<b>TOTAL</b> \$568.45

FPPC Form 460 (June/01)  
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Memo Reference: INC329  
Contribution Returned